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SEP 29 2005

PTO/SB/97 (08-00)

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Application Number: 09/884,316

Filing Date: 6/19/2001

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United States Patent and Trademark Office

on 09/29/2005

Date



Signature

Laurie Morgan

Typed or printed name of person signing Certificate

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1. Fee Transmittal
2. Response to Office Action Dated 06/30/2005

Total pages including cover sheet: 13

BE1-0063US
(571) 273-8300

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PTO/SB/17 (12-04)

Approved for use through 07/31/2006. OMB 0851-0032

U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

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Effective on 12/09/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL
For FY 2005☐ Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT** (\$) 0.00**Complete if Known**

Application Number	09/884,316	RECEIVED
Filing Date	6/19/2001	CENTRAL FAX CENTER
First Named Inventor	Sunil H Contractor	SEP 29 2005
Examiner Name	Quyng H Nguyen	
Art Unit	2642	
Attorney Docket No.	BE1 0063US	

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____

☒ Deposit Account Deposit Account Number: 12-0769 Deposit Account Name: Lee & Hayes, PLLC

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FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent	50	25
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent	200	100
Multiple dependent claims	360	180

Total Claims **Extra Claims** **Fee (\$)** **Fee Paid (\$)** **Multiple Dependent Claims**

- 20 or HP = _____ x 50 = _____ **Fee (\$)** **Fee Paid (\$)**

HP = highest number of total claims paid for, if greater than 20

Indep. Claims **Extra Claims** **Fee (\$)** **Fee Paid (\$)**

- 3 or HP = _____ x 200 = _____

HP = highest number of independent claims paid for, if greater than 3

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).


Total Sheets **Extra Sheets** **Number of each additional 50 or fraction thereof** **Fee (\$)** **Fee Paid (\$)**

- 100 = _____ / 50 = _____ (round up to a whole number) x _____ = _____

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other: _____

SUBMITTED BY		Registration No. 40480	Telephone (509) 324-9256
Signature		(Attorney/Agent)	
Name (Print/Type)	Rocco L. Adornato	Date	29 SEP 05

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SEP 29 2005

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application Serial No.09/884,316
Filing Date 19 June 2001
Inventorship.....Sunil H. Contractor
ApplicantBellSouth Intellectual Property Corporation
Group Art Unit 2642
Examiner Quynh H. Nguyen
Attorney's Docket No.BE1-0063 US
Title: System and Method for Forwarding Selective Calls

RESPONSE TO OFFICIAL ACTION DATED 30 JUNE 2005

To: Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

From: Rocco L. Adornato (Tel. 509-324-9256 x257; Fax 509-323-8979)
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INTRODUCTORY COMMENTS

This communication is responsive to the Office Action dated 30 June 2005, for which a three-month shortened statutory period for response is set for 30 September 2005. Please amend the above-captioned application as follows:

Amendments to the Claims begin on page 3 of this paper.

Remarks begin on page 9 of this paper.